

BULLETIN

of the MAHONING COUNTY MEDICAL SOCIETY

Volume XLV

SEPTEMBER, 1975

Number 6



MEDICAL EXHIBITS

MAHONING COUNTY
MEDICAL SOCIETY.



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Indications: *Edema:* That associated with congestive heart failure, cirrhosis of the liver, the nephrotic syndrome, steroid-induced and idiopathic edema, edema resistant to other diuretic therapy. *Mild to moderate hypertension:* Usefulness of the triamterene component is limited to its potassium-sparing effect.

Contraindications: Pre-existing elevated serum potassium. Hypersensitivity to either component. Continued use in progressive renal or hepatic dysfunction or developing hyperkalemia.

Warnings: Do not use dietary potassium supplements or potassium salts unless hypokalemia develops or dietary potassium intake is markedly impaired. Enteric-coated potassium salts may cause small bowel stenosis with or without ulceration. Hyperkalemia [>5.4 mEq/L] has been reported in 4% of patients under 60 years, in 12% of patients over 60 years, and in less than 8% of patients overall. Rarely, cases have been associated with cardiac irregularities. Accordingly, check serum potassium during therapy, particularly in patients with suspected or confirmed renal insufficiency (e.g., elderly or diabetics). If hyperkalemia develops, substitute a thiazide alone. If spironolactone is used concomitantly with 'Dyazide', check serum potassium frequently—both can cause potassium retention and sometimes hyperkalemia. Two deaths have been reported in patients on such combined therapy (in one, recommended dosage was exceeded, in the other, serum electrolytes were not properly monitored). Observe patients on 'Dyazide' regularly for possible blood dyscrasias, liver damage or other idiosyncratic reactions. Blood dyscrasias have been reported in patients receiving Dyrenium (triamterene, SK&F). Rarely, leukopenia, thrombocytopenia, agranulocytosis, and aplastic anemia have been reported with the thiazides. Watch for signs of impending coma in acutely ill cirrhotics. Thiazides are reported to cross the placental barrier and appear in breast milk. This may result in fetal or neonatal hyperbilirubinemia, thrombocytopenia, altered carbohydrate metabolism and possibly other adverse reactions that have occurred in the adult. When used during pregnancy or in women who might bear children, weigh potential benefits against possible hazards to fetus.

Precautions: Do periodic serum electrolyte and BUN determinations. Do periodic hematologic studies in cirrhotics with splenomegaly. Antihypertensive effects may be enhanced in postsympathectomy patients. The following may occur: hyperuricemia and gout, reversible nitrogen retention, decreasing alkali reserve with possible metabolic acidosis, hyperglycemia and glycosuria (diabetic insulin requirements may be altered), digitalis intoxication (in hypokalemia). Use cautiously in surgical patients. Concomitant use with antihypertensive agents may result in an additive hypotensive effect. 'Dyazide' interferes with fluorescent measurement of quinidine.

Adverse Reactions: Muscle cramps, weakness, dizziness, headache, dry mouth, anaphylaxis; rash, urticaria, photosensitivity, purpura, other dermatological conditions; nausea and vomiting (may indicate electrolyte imbalance), diarrhea, constipation, other gastrointestinal disturbances. Necrotizing vasculitis, paresis, icterus, pancreatitis, xanthopsia and, rarely, allergic pneumonitis have occurred with thiazides alone.

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Mahoning County Medical Society Meetings — 1975

January	March	May	September	November	December
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

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From the Desk of the President



Recently, Dr. Crile of the Cleveland Clinic published in the lay press, an expose suggesting that surgeons should be on salaries. He suggests that unnecessary surgery is being done because of conflict of interest and that given a choice between \$25 for not operating and \$500 for operating, the surgeon will pick the \$500!

This is a real indictment of Medicine in general and surgery in particular. It is an indictment of our surgical training and the professors who taught us, including Dr. Crile himself! It is an indictment of our surgical societies and colleges and boards.

If Dr. Crile is talking about a small percentage of men who would succumb to such unethical practice, then why not develop means to handle the specifics rather than punish the 95+% who are truly honest and dedicated. Should we jail the population to prevent crime? If, on the other hand, Dr. Crile believes that a large percentage or most of the surgeons do dishonest surgery then this must have been going on for some time and will include men he trained and some of his friends and associates. The surgical world will want to know what this moral reformer and eminent professor of surgery would do beside putting everyone on salaries. This solution will only usher in more problems:

First, we should assume that if dishonesty is a major problem among surgeons, it is surely a major problem among all men who engage in free enterprise. Hence free enterprise should be abolished. Second, a salaried surgeon will have no incentive—(remember, we are talking about dishonest surgeons who are concerned more with money than the welfare of their patients) therefore, before long, we will be short of surgeons and some necessary surgery will have to be delayed or neglected. Then we have one of two choices: hire more surgeons, which will increase the cost in salaries and bureaucracy, or go part way on salary and part way on incentive.

I don't know how the Cleveland Clinic, which Dr. Crile uses as a model, handles this problem. In some institutions they have salary and incentive e.g. every one is paid the same but what is left is then distributed according to the work done by the individual. According to our previous logic this system should produce only half crooks!

I am certain of one thing, that writing about such problems in the Ladies' Home Journal and newspapers will not make one honest surgeon out of a crooked one. For the old "crooks", we can solve the problem thru education, and strict audit systems. We should utilize the help of our various surgical organizations and specialty boards.

(Continued on Page 121)



BULLETIN

of the Mahoning County Medical Society

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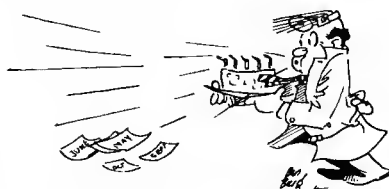
The opinions and conclusions expressed herein do not necessarily represent the views of the Editorial staff nor the official views of the Mahoning County Medical Society.

EDITOR Earnest Perry, M.D.

ASSOCIATE EDITOR J. C. Melnick, M.D.

EDITOR EMERITUS James L. Fisher, M.D.

HAPPY BIRTHDAY



Get your annual check-up • Is it time to renew your driver's license?

Sept. 16

P. H. Fuscoe
N. J. Garritano

Sept. 17

J. Dentscheff

Sept. 18

J. A. Renner
M. C. Galose

Sept. 19

D. Malta

Sept. 20

W. Moskalik
E. Perry
H. S. Hwang

Sept. 21

R. G. Warnock
R. P. Meader

Sept. 23

W. J. Flynn
M. Halmos

Sept. 24

U. B. Jeong

Sept. 26

E. A. Massullo

Sept. 27

R. J. Scheetz
G. J. Baumblatt

Sept. 29

D. H. Levy
M. H. Hamblin

Oct. 1

J. R. Smith

Oct. 2

W. L. Crawford

Oct. 4

G. Delfs

Oct. 5

B. Katz

Oct. 8

J. N. McCann

Oct. 9

J. F. Stotler

Oct. 11

H. S. Ellison
E. Hecker

Oct. 12

B. I. Firestone
J. R. Gillis
A. Garcia

Oct. 14

J. H. Smith
G. R. Barton

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FROM THE DESK OF THE PRESIDENT

(Continued from Page 118)

For those who are aspiring to be surgeons, we should utilize strict methods of screening and then through example, teaching and training, by honest and dedicated men like Dr. Crile, the Golden Rule will be the guide of the surgeon. That time will be obvious when it comes for then each of us will at least hesitate to throw the first stone.

—Rashid Abdu, M.D.
President

MASHEN EXECUTIVE IS SEPTEMBER SPEAKER

Ken Proefrock, Executive Director of the Mahoning and Shenango Area Health Education Network (MASHEN) will speak on "Community Based Health Educational Network" at the Sept. 16th meeting of the Mahoning County Medical Society at the Youngstown Club.



With the developing medical school, and the requirements for continuing medical education being part of the new malpractice law in Ohio, the role of MASHEN is becoming of increasing interest to area physicians. Most doctors are receiving the "Continuing Educational Calendar," issued monthly by MASHEN, which lists all local medical conferences and televised programs.

Ken came to Youngstown from the Health Association of Rochester and Monroe County, New York, where he was Executive Director. While in Rochester, he helped organize and was first chairman of the Association of Health Agencies, made up of over sixty health related agencies and organizations. He directed the development of a comprehensive treatment program for drug abusers in Monroe County, the Monroe County Alcoholism Outreach Service and a Hostel for Alcoholics, a special program in recreation therapy for children with learning disabilities, and a 24-hour health information and crisis phone service.

He is a native of central Illinois, majored in philosophy and psychology at Carthage College, and holds a masters degree from Chicago Lutheran Theological Seminary. He and his wife and three children live in Boardman.

Reservations for the dinner, for members and spouses, may be made at the Medical Society office. Dinner is at 6:30 p.m., preceded by a social hour at 6:00. Cost is \$9.50 per person for dinner. There is no charge for those attending the meeting only, which will begin about 7:30 p.m.

MEDICAL ASSISTANTS DINNER IN OCTOBER

The Medical Assistants Dinner has become one of the largest annual parties given by any organization in Mahoning County. Last year's attendance was just short of 300 girls. This year's event will take place on Thursday, Oct. 2, at Ramada Inn.

Doctors are invited to send all of their girls. A social hour begins at 6:30, with dinner at 7:00 and entertainment following dinner. Cost is \$15 per girl. There will be dinner, music, favors, door prizes, fun and entertainment. The party is open to all nurses, technicians, secretaries, receptionists and other medical assistants working for members of the Mahoning County Medical Society.

Chairman for this year's party is Dr. George Dietz.

MEDICAL ASSISTANTS INSTALL OFFICERS



1975 officers (L. to R.) June Kyle, June Boyle, Nena LaBarbera, Grace Brady and Betty Ann Perschka. Laura Lockhart, national president, presents the gavel to Nena LaBarbera.



Five officers were formally installed at the annual dinner of the Medical Assistants Society of Mahoning County, held June 12 at Fonderlac Country Club. Nena LaBarbera became president for a second term. Other officers are Grace Brady, president-elect; June Kyle, recording secretary; Betty Ann Perschka, corresponding secretary, and June Boyle, treasurer.

Installation was conducted by Laura Lockhart, president of the American Association of Medical Assistants. Members of the Medical Assistants Committee of the Medical Society are Dr. W. H. Evans, chairman, and Drs. B. M. Brandmiller, B. B. Burrowes and J. A. Ruiz.

START PACKIN'

Once a year you are given the opportunity of getting rid of those accumulated drug samples that you are unable to use. This year, the Woman's Auxiliary will conduct their annual drug pick-up in October. You can help the ladies by starting now to pack the samples into boxes and bags so that they will be easy to carry when a volunteer calls at your office.

The collection dates are Monday, Oct. 6, through Friday, Oct. 24. A member of the Auxiliary will phone your office to let you know when she will arrive for pick-up.

The total collected drug samples will be forwarded to World Medical Relief, an organization which distributes medical supplies to missions at home and abroad and to hospitals all over the world. The Auxiliary has been participating in this work for more than a decade. Chairman for this year's drug pick-up is Mrs. Robert R. Rich. Auxiliary president is Mrs. J. James Anderson.

NEW MEMBERS

The following applications for membership have been approved by Council during the summer months.

ACTIVE: Reed Hoffmaster, M.D.

ASSOCIATE: Richard Arnott, D.O.

Paul Silverstein, D.O.

Each applicant will become a member of the Mahoning County Medical Society 15 days after publication in the *Bulletin*, unless objection is filed in writing with the secretary before that time.

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MEDICAL SOCIETY EXHIBITS A

MEDICAL MUSEUM

The 1975 Canfield Fair, which initiated the Bicentennial celebration for Mahoning County, also marked the 24th consecutive year that the Mahoning County Medical Society has sponsored the combined health exhibition. Five years ago the medical-health exhibits graduated from the largest tent on the fairgrounds to the beautiful modern Medical Health Building, furnished by the Canfield Fair Board for our exclusive use.

This year, the Mahoning County Medical Society exhibit truly became a "medical museum" featuring scores of early and unusual medical instruments along with some large equipment belonging to Dr. John Heberding and Dr. R. G. Mossman. Included in the two showcases and on the walls were surgeon's field kits from two wars, the Civil War and World War I. The Medical Society's centennial was commemorated with a portrait of Dr. Timothy Woodbridge, the first president, and a signed commendation from the Mayor of Youngstown and all members of City Council.

Companion to the museum portion of the display is the old doctors office which includes a roll-top desk, wall telephone, and other furniture from the turn-of-the century.

Contributing to the museum concept for the new building is the outstanding display by the Northeastern Ohio Pharmaceutical Association. They have recreated a prescription room of an early drug store. The exhibit was begun two years ago. This year the exhibit was enlarged by 10 feet to accommodate a great number of items that the druggists collected during the past year. Their's is a truly outstanding display.

Both of these exhibits are now permanent. The only changes to be made will be enlarging and improving them as more antique material is collected. In all, there were 31 exhibitors, consisting of allied professions, volunteer health agencies and government health departments in the building. All are being encouraged to bring their displays into the health museum concept.

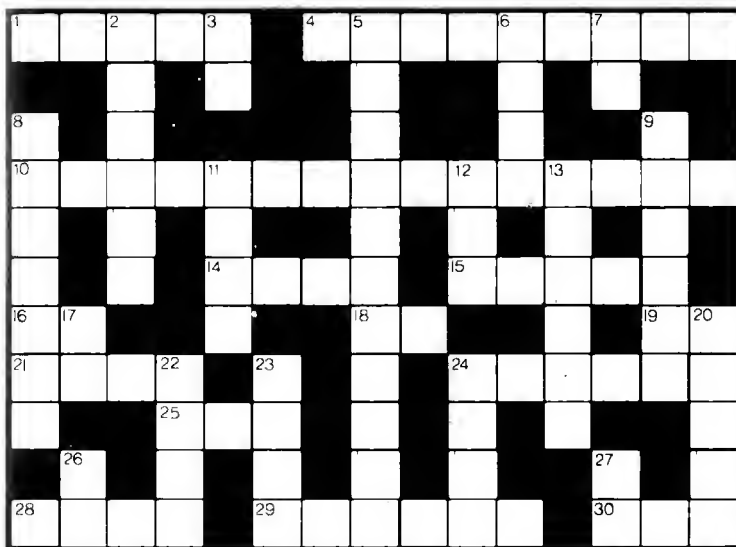
The Medical Society museum has gradually taken shape over the past several years under the guidance of the Canfield Fair Committee, Jack Schreiber, M.D., chariman. Donations and loans to the museum have come from members, wives, retired members and doctors' widows. The Medical Society extends thanks to all of these people. A list of donors will be compiled for future exhibits.

RESOLUTION

Omnibus Malpractice Bill

- WHEREAS:** A serious problem existed in the State of Ohio in regard to the procurement of professional liability insurance for physicians, and
- WHEREAS:** Individual physicians in increasing numbers were finding that they were unable to renew their malpractice insurance policies, a situation which threatened to disrupt the private practice of medicine in Ohio and
- WHEREAS:** A state-wide medical crisis was averted when the malpractice bill sponsored by the Ohio State Medical Association was signed into law by the Governor of Ohio, therefore be it
- RESOLVED:** That the Mahoning County Medical Society commend the officers and staff of the Ohio State Medical Association for their untiring efforts in behalf of the physicians of Ohio, which resulted in the timely passage of the Omnibus Malpractice Bill.

—Council, Mahoning County Medical Society

CROSSWORD PUZZLE**ACROSS**

1. Part of the medical team
4. Our Sept. meeting speaker
10. Association
14. Controversial gov't. pgm.
15. "connected to the hip bone"
16. Sixth District Councilor
18. World organization
19. "How's that?"
21. A small round structure
24. Horse talk
25. Hospital Dept.
28. Reason for going to a doctor
29. Connects bladder and kidney
30. Extreme alcoholism

5. What a large attendance at the Sept. meeting would do to our Council

6. President
7. Alright
8. Medicine's real V.I.P.
9. Our Sept. speaker's organization
11. Wee devils
12. Medical specialty
13. Inflammation of the Iris
17. Recently admitted member of MCMS
20. The needle (pl.)
22. Enthusiasm
23. Our president
24. Auxiliary member
26. Dread disease
27. Medical Society member

DOWN

2. Ebb
3. One point of entry to hospital

SERVICE OPPORTUNITIES FOR RETIRED PATIENTS

Some of your older patients may be interested in a program for retirees wherein they may participate more fully in the life of the community through volunteer service. The name of the program is Retired Senior Volunteer Program (RSVP).

If you have a patient for whom volunteer service would be beneficial, he might wish to call RSVP at 744-4281. If you would like to have RSVP brochures for your office you may obtain them by phoning the same number.

RSVP is funded through a federal grant. Grantee Agency for Mahoning County is Catholic Service League. Complete information is available from that organization.



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PRESCRIPTION SIGNATURES

(Editor's note: The following letter, received from the Eastern Ohio Pharmaceutical Association, is hereby brought to the attention of all members of the Mahoning County Medical Society.)

In a continuing effort to do our part in providing the best possible service to the patients to whom we dispense prescription medication, your cooperation is solicited in bringing the question of *physicians and dentist's signatures* before the doctors in your organization.

Ohio law is clear that a written order for prescription medication must be signed by an authorized practitioner before it gains the status of a valid prescription. If the signature is not recognizable or is illegible, the written order does *not* gain the legal status of a prescription and need not be honored.

The dilemma of unrecognizable signatures, however, presents more practical problems than legal ones.

Many such prescriptions need clarification as to the drug prescribed, the strength, and directions. If the prescription is written by a member of a hospital house staff, the patient may not know the name of the practitioner who wrote it. The same is true, albeit less frequent, when the prescription is written by a member of a group clinic-type practice. If the practitioner who wrote the prescription is not identifiable, the pharmacist has no one to contact and an unnecessary delay results in dispensing the medication.

Pre-printed prescription blanks with the name of the practitioner printed on the top are most helpful, and we encourage their use. Some hospital prescription blanks provide space for the practitioner to PRINT his or her name below the signature, and use of these is also encouraged.

Due to the problem of stolen prescription blanks and forged signatures, it is dangerous to assume that just because an otherwise apparently valid prescription is presented, it is legitimate. If the practitioner's signature is identifiable on a suspicious prescription its authenticity can be verified by a phone call.

We know you share our concern for the well-being of the patient and trust you will choose to communicate this letter to your people.

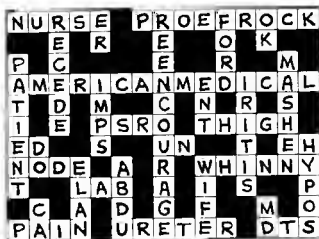
FOUNDATION MAKES TWO LOANS

At a meeting in August, the Mahoning County Medical Society Foundation made two \$500 loans to medical students, bringing to 15 the number of loans made by the current Foundation.

One loan went to Hayes Ronald Berk, a medical student at Ohio State University. The other went to John Raymond Holub, Jr., a medical student at Kirksville College of Osteopathic Medicine. The appointing committee of the Foundation is hoping to give a third loan this year and is searching for funds with which to do it.

Members of the committee are: Dr. Rashid Abdu, chairman, and Drs. John J. McDonough, J. C. Melnick, S. F. Gaylord, M. C. Raupple, R. B. McConnell and M. S. Rosenblum.

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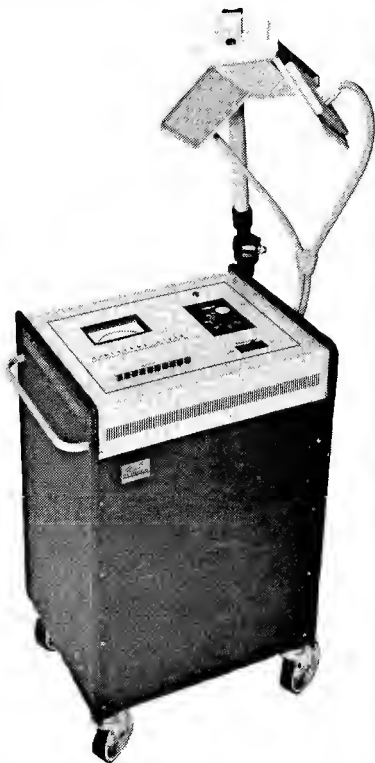
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From the Bulletin

FORTY YEARS AGO — SEPTEMBER 1935

The Medical Society passed a lengthy resolution opposing all forms of private contract practice in the care of the indigent because it is not in accord with the accepted principle of free choice of physicians and because experience has demonstrated absolutely that this method does not furnish adequate medical attention to the indigent sick.

There was much more of it, with five whereas and five resolves, but it dealt with the eternal problem of government meddling in the practice of medicine. Times do not change, just meddlers.

THIRTY YEARS AGO — SEPTEMBER 1945

The war was over. Preparations were being made to receive the returning veterans. Dr. W. K. Allsop was appointed to form a committee to give any necessary aid to returning physicians. The Association of American Physicians and Surgeons sent a letter to President Truman demanding an investigation of the delay in releasing physicians from the armed forces.

Hospital interns were James Patrick, Wayne Hardin, Gene Fry, J. F. Stechschulte, M. C. Raupple and Alex Rosenblum.

TWENTY YEARS AGO — SEPTEMBER 1955

Frank Gelbman had a leading article on "Anxiety and Depression." President Ivan Smith was after the members for better giving to the Community Chest. He said, "If we give proportionately as much as the humblest laborer in the community, we will make a much better showing than we have in the past."

Charles Hudson, president of OSMA, cautioned physicians that a limited supply of polio vaccine is available and asked inoculations be limited to the 5 to 9 age group.

TEN YEARS AGO — SEPTEMBER 1965

President John J. McDonough wrote an open letter to Mayor Flask commending him on his Mayor's Committee on Traffic Safety and offering a number of suggestions to implement safety for drivers and pedestrians.

Jack Schrieber had an article putting forth the concept of non-participation as a means of avoiding the status of being controlled by the Government under the new Medicare program.

Editor Kurt Wegner called operation Headstart an important part of the Government's Anti-Poverty Program, with a goal that is both practical and sound.

Physicians were reminded that they must apply for social security numbers now that they are subject to the social security tax and benefits.

—J. L. F.

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THE MEDICAL ASSISTANTS SOCIETY

The Medical Assistants Society of Mahoning County was organized in January, 1961, with 45 members. We became affiliated with the State and National organizations in 1962, at which time, we had 83 members. During the span from 1961 to the present date, our membership has fluctuated anywhere from 83 members to 32 members. Also, during this period, we had one honorary membership, which was given to Dr. Arthur Marinelli.

The Chapter has had many money making projects, the main one being our yearly card party, which have netted profits anywhere from \$250.00 to \$2,099.67. Donations given from these profits have gone to Hospital Ship Hope, American Red Cross, Community Chest, Youngstown Hospital Association, St. Elizabeth Hospital, Mahoning County Home for the Aged, Youngstown Hearing & Speech Center, Valley Homes for Youth, J. Ford Crandall Rehabilitation Center, Trumbull County Cancer Society, Campaign funds for our State and National advisors, donations for all convention bulletins and State bulletin ads and National bulletin ads. The above were compensated by profits made by the card parties. Our other money making projects consisted of rummage sales, White Elephant sales and raffles. We also cooperate with the State Medical Assistants Society in helping them with their money making projects.

Delegates have been sent every year to the conventions, and many of our girls have participated on state level jobs. We have held yearly workshops to which an invitation is extended to all girls working in medical doctors' offices to help them extend their education along with us. Most of the workshops have been held at the Youngstown Hospitals and St. Elizabeth Hospital. This year, 1975, we are holding a State Seminar in October. Up to several years ago, members were given the complete workshop with luncheon included at no cost to her. As our membership dwindled down to the present 32, it has been necessary to charge our members the minimum for the workshop.

We have, during this span of time, served the public, not only as medical assistants in each girl's office, but we assisted the Medical Society at the time the Salk Vaccine was distributed. We have, also, helped distribute pamphlets for the Medical Society in regard to Socialized Medicine. We are willing and hope to continue helping the doctors and Medical Society in any way we can.

In 1969, we held the Ohio State Convention of Medical Assistants here in Youngstown. All of our members worked very hard—we were very tired; but it was oh so gratifying to know it was a great success. We made a profit of \$5,500.00, which was turned over to the AAMA Ohio State Society. At that time, the hostessing chapter was not permitted to retain any of the profits, but now they can retain 25% of the profits. To date, our State Convention has been the most lucrative.

Our Constitution and By-Laws state definitely that we are unable to become unionized, a fact which we the members would like to bring forth strongly.

After our Convention in 1969, we did not hold any more card parties, but we did start again this year, with the hopes of giving to all medical assistants the opportunity for continuing education.

—Nena La Barbera, President

CARDIAC AUSCULTATION PROGRAM IN OCTOBER

A two-day program on "Cardiac Auscultation" will take place Oct. 10-11 at Holiday Inn, Belmont Ave. Program will begin at noon Friday continuing to 8:45 p.m., and Saturday from 8:00 a.m. to 2:15 p.m. Dr. L. P. Caccamo and Barbara Ann Ericson (Sister Barbara) will put on the program. Cost is \$55. For further information, call office of continuing education, Youngstown State University.

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PROCEEDINGS OF COUNCIL**Aug. 12, 1975**

The regular meeting of the Council of the Mahoning County Medical Society was held on Tuesday, Aug. 12, 1975, at the Youngstown Club.

The letter from H. William Porterfield, M.D., president of the Ohio Foundation for Medical Care was discussed. This letter had been mailed to every member of the Mahoning County Medical Society (and presumably every member of OSMA) and announced a program of supervisory teams for medical assistant patients in nursing homes. It was noted that this was not the original intention of the Foundation.

Dr. Pichette, in his Councilor's Report, mentioned the lawsuit brought by the Lieutenant Governor of Ohio against OSMA and OMI and the necessity for a considerable amount of money to be spent by OSMA to defend against the lawsuit.

Considerable discussion was generated concerning the Malpractice Omnibus Law as passed with consideration being given to its bad points and good points.

A letter from Retail Credit Co. calling attention to their subsidiary, Physical Measurements, Inc. was filed for information. The organization apparently offers a service of basic physical measurements on individuals to insurance companies.

A letter was read from the American Medical Association calling attention to plans of the Telephone Company to offer separate specialty listings in their yellow pages. The motion was made by Dr. Klodell, and properly seconded, that we reaffirm our previous stand and approve that listings continue to be carried in the present format. Motion was passed.

A letter was read from OSMA announcing the candidacy of John H. Budd, M.D. for election to the office of President-elect of the American Medical Association at the 1976 annual convention in Dallas. The motion was made by Dr. Tandatnick, and properly seconded, that the Mahoning County Medical Society endorse the candidacy of Dr. Budd. Motion was passed. Dr. Pichette announced that he is going to seek financial contributions to help Dr. Budd in his campaign. The motion was made by Dr. Deramo, and properly seconded that those who would be willing to make a financial contribution to Dr. Budd's campaign should be given the opportunity of so doing by forwarding a check for the campaign to the office of the Mahoning County Medical Society. Motion was passed.

A report was made that the exhibits in the medical health building at the Canfield Fair will be better than ever.

Dr. Dietz reported progress on the Medical Assistants Dinner, which is scheduled for Thursday, Oct. 2nd.

A resolution was submitted by Dr. Abdu commending the OSMA officers and staff for the work they did in meeting the malpractice insurance crisis. The motion was made by Dr. Anderson that the resolution be adopted. Motion was passed.

Dr. Abdu introduced discussion concerning a hemophilia center in Youngstown, and the actions taken by the Mahoning Valley Health Planning Association in promoting establishment of a center. The motion was made by Dr. Barton, and properly seconded that a letter be sent to MVHPA suggesting that when they have some medical matter to dispose of that they come to the Mahoning County Medical Society and allow us to advise them as to how it may best be handled. Motion was passed.

Dr. Abdu asked for good attendance from council members at the Sept. 16th meeting of the Mahoning County Medical Society.

Dr. Abdu cited a request from Dr. P. H. Kennedy that the Medical Society write a letter to Dr. Coffelt at Youngstown State University supporting his desire to do research on tilted pelvis with college students as subjects. A

letter will be written to Dr. Coffelt citing Dr. Kennedy's fine qualifications and reputation and stating that any physician is entitled to do research.

It was announced that the print-out on the Medical Assistants Blue Cross-Blue Shield had been received. The print-out was referred to the Insurance Committee.

Dr. Deramo introduced discussion concerning the fact that many times the news of new drugs and new procedures appear in the public press long before the comprehensive reports appear in medical publications. He expressed the desire that new information be disseminated through the medical society office to our members so that they would be prepared when patients questioned the physician about medical news stories.

Meeting was adjourned.

—Howard Rempes
Executive Secretary

PSRO — REALITY AND FANTASY

P.S.R.O. in theory and fact — is discussed in a recent issue of "The American Journal of Psychiatry" (August 1975). Realistic questions, reasonable doubts, and potential dangers are expressed.

1. Will there really be "local" control under federal rules and standards? Impossible.

2. P.S.R.O. states the standard "normal" will be based upon actual practice in that area. How soon will standards be based on so called "scientific" literature without proper consideration for actual clinical experience?

3. Standards and norms too easily become absolutes and ideals—without consideration of variations in patients, diseases, settings.

4. Standards and norms of patient care can foster mediocrity and cook book medicine.

5. P.S.R.O. is subject to the rules and regulations of H.E.W. "Self regulation by physicians" are empty words whose meaning and effect is determined only by H.E.W. Politicians work in rhetoric and promises—not healing.

6. The pressures to conform to national standards will be great—allegedly for the purpose of "economy" but probably for political control.

7. Economic control would become political control. The A.M.A.'s cost predictions (politely called "propaganda") for Medicare were far more accurate than the government estimates. Then, physicians and hospitals were blamed for government miscalculations. This led to P.S.R.O.

8. Will P.S.R.O. improve patient care? Will the money involved actually improve the quality of care? P.S.R.O. focuses on the hospital record not clinical care. P.S.R.O. is cost control—neither quality control nor "peer review".

9. Record keeping and reviewing would become more important than the patient and therapy.

10. Will professional confidences be violated?

11. The law states that practicing physicians make the final decision. It also allows laymen, nurses, and non clinical physicians to be involved if H.E.W. decides that physicians are either refusing to participate in review or not meeting H.E.W.'s self determined expectations.

12. Physicians now trying to complement P.S.R.O. are finding their functioning and decisions are predetermined. They are not designing—they are implementing cumbersome, confusing, and conflicting regulations.

I am certain that practicing physicians have either sensed or known most of the above and more.

Is it too late to find realistic and practical solutions to problems that truly exist?

—Frank Gelbman, M.D.

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Precautions: In the elderly and debilitated, and in children over six, limit to smallest effective dosage (initially 10 mg or less per day) to preclude ataxia or oversedation, increasing gradually as needed and tolerated. Not recommended in children under six. Though generally not recommended, if combination therapy with other psychotropics seems indicated, carefully consider individual pharmacologic effects, particularly in use of potentiating drugs such as MAO inhibitors and phenothiazines. Observe usual precautions in

presence of impaired renal or hepatic function. Paradoxical reactions (e.g., excitement, stimulation and acute rage) have been reported in psychiatric patients, and hyperactive aggressive children. Employ usual precautions in treatment of anxiety states with evidence of impending depression; suicidal tendencies may be present and protective measures necessary. Variable effects on blood coagulation have been reported very rarely in patients receiving the drug and oral anticoagulants; causal relationship has not been established clinically.

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